## FEC FORM 1

9020354409

## STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

(See instructions)

090m3645 4m5 PH 5: 16

1.	NAME OF COMMITTEE (in full)		heck if name changed)	Example: If typ over the lines	ying, type 12F	E4M5
لــا	Friends of Mary Landr	ieu, Inc.			<u> </u>	
لــا	1111111		<u>L.L.1.1.1.</u>			
ADI	ORESS (number and street)	607 14tl	h Street, NW			
	(Check if address is changed)	Suite 80	00			1111111111
v.		Washin	gton			C 20005
				CITY	STAT	ZIP CODE 🛦
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)						
•	(Check if address is changed)	plgroup	@perkinscoi	e.com		
	is oracigou)					
COMMITTEE'S WEB PAGE ADDRESS (URL)						
	(Check if address http://www.marylandrieu.com					
	is changed)		1111		<u> </u>	_1
2. DATE M M / D D / Y 2 0 0 9  3. FEC IDENTIFICATION NUMBER C C00325126						
			-		<u>^                                    </u>	
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)						
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete						
Type or Print Name of Treasurer Nancy Marsiglia						
Sigi	nature of Treasurer Electro	onically Filed b	y Nancy Ma	rsiglia 8	Date	1.0 1.5 2.009
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS						
	Office Use Only			Federal Ele	r information contact: ection Commission 00-424-9530	FEC FORM 1 (Revised 02/2009)